Overview of the Army Substance Abuse Program (ASAP)

OBJECTIVES

- **Identify the two ASAPs**
- **Identify the conditions that require a Soldier to be processed for administrative separation for substance abuse**
- **Identify testing and training requirements outlined in AR 600-85**

Program Authority

Public Law 92-129 28 Sep 1971

Established drug prevention and control programs in the Armed Forces.

DoD Directive 1010.1

9 Dec 1994 - Drug Abuse Testing Program.

DoD Instruction 1010.16

9 Dec 1994 - Technical Procedures for the Military Personnel Drug Abuse Testing

Army Regulation 600-85 15 Oct 2001

Army Substance Abuse Program (ASAP)*

*** Formally known as Alcohol and Drug Abuse Prevention Control Program (ADAPCP)**

ASAP Principle

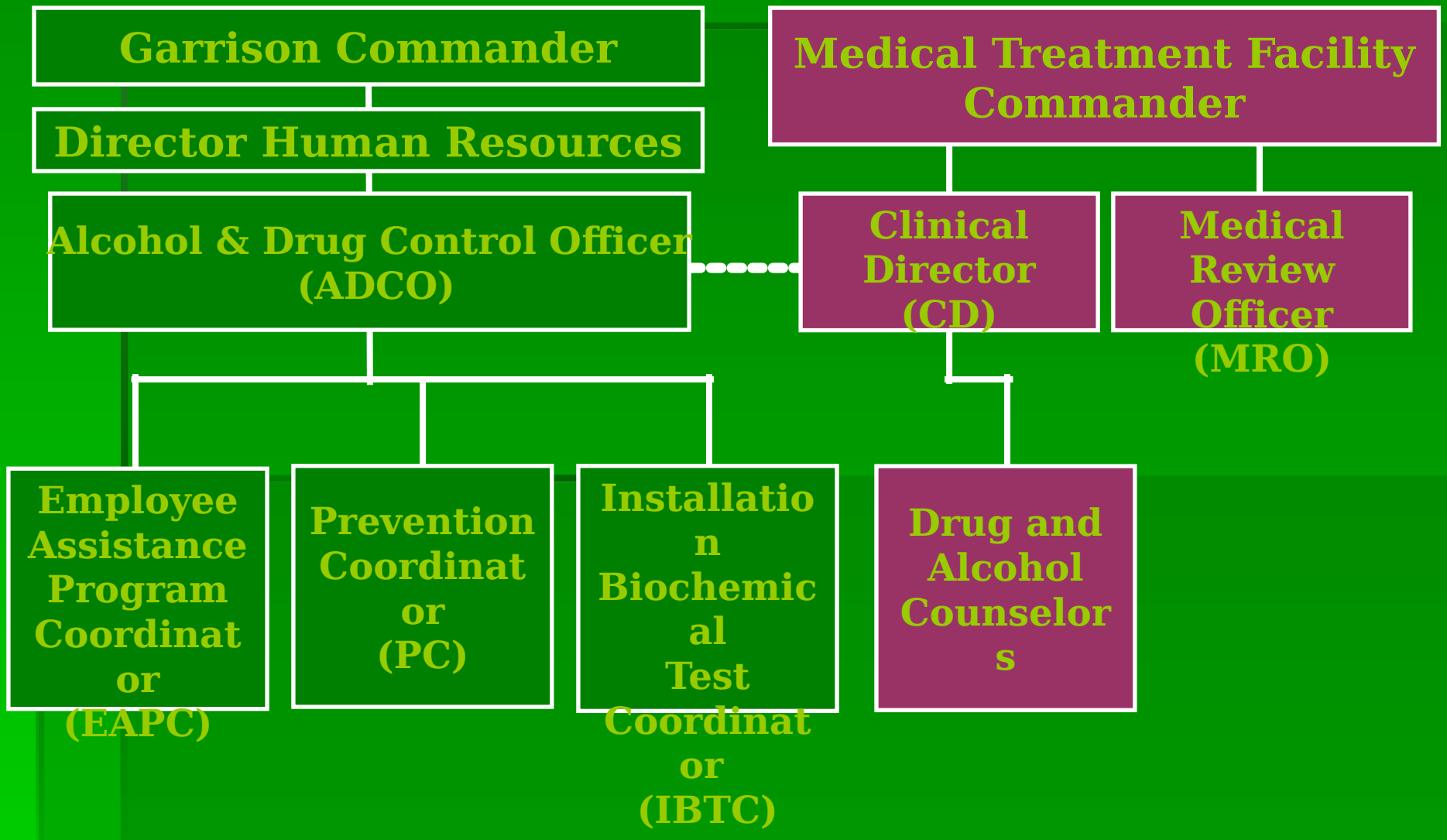
Abuse of alcohol or use of illicit drugs by both military and civilian personnel is inconsistent with Army values, standards of performance, discipline, and the readiness necessary to accomplish the Army's mission.

Guiding Principles

AR 600-85 1-31 states:

- **The Army Substance Abuse Program is a *command* program that emphasizes readiness and personal responsibility.**
- **The *command* role in prevention, biochemical testing, early identification, rehabilitation and administrative or judicial actions is essential.**
- ***Commanders* will ensure that all**

Army Substance Abuse Program Organization



Army Substance Abuse Program Staff

- **Alcohol and Drug Control Officer (ADCO) – The Garrison ASAP manager and the Commander's POC for all substance abuse issues.**
- **Prevention Coordinator (PC) – Conducts education and prevention efforts on the installation – Unit's main resource for education and training materials.**
- **Installation Biochemical Test Coordinator (IBTC) – The installation SME on drug testing issues.**
- **Employee Assistance Program Coordinator (EAPC) – POC for troubled civilian employees to receive counseling and referral services.**
- **Clinical Director (CD) – Clinical ASAP Manager**

ASAP Services

- **Garrison**
  - **Provide prevention education – Unit training, school programs, special events, etc.**
  - **Provide information - Campaigns, posters, pamphlets, etc.**
  - **Run the drug testing program**
  - **Train and certify UPLs**
  - **Civilian Employee Assistance Program**
- **Clinical**
  - **Screen personnel for possible enrollment in treatment**
  - **Provide treatment services**
  - **Medical Review Officer (MRO) services from MTF (not ASAP) – The MRO determines if a positive specimen was positive due to legitimate medical use or illicit use**

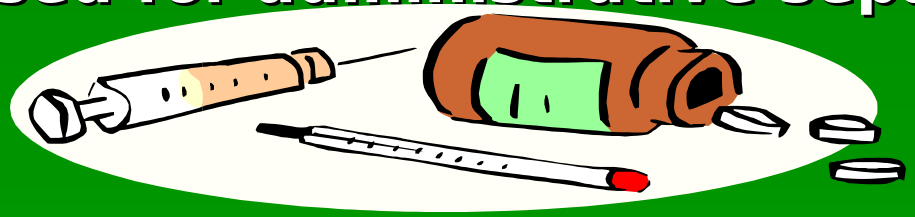
Commander's Responsibilities

- Implement a unit biochemical-testing program.
- Implement ASAP prevention and education initiatives – 4 hours/year.
- Ensure all newly assigned Soldiers are briefed on ASAP policies and services.
- Maintain ASAP elements while deployed.
- Report all offenses involving illegal possession, use, sale, or trafficking in drugs or drug paraphernalia to the PMO. This includes all positive drug test.

Drug Use Policy

Soldiers identified as drug abusers – using illegal drugs, using someone else's prescribed drugs or abusing their own prescription. Regardless of rank or time in service, must be:

- **Referred for screening at the Clinical ASAP**
- **Considered for disciplinary action under UCMJ**
  - **Courts-Martial**
  - **Article 15**
- **Processed for administrative separation**



Alcohol

- **Testing - Commanders may test the unit or parts of the unit randomly for alcohol:**
  - **Blood Alcohol Content (BAC), based on breath test, of .05% is considered impaired on-duty**
  - **Test must be confirmed by MP breathalyzer or a Legal Blood Alcohol Test at the MTF.**
- **Commanders must deglamorize alcohol use; alcohol consumption should NOT be the main focus of any unit event.**
- **Enforce underage drinking violations – charge both the underage drinker and the Soldier that provided the alcohol.**

Alcohol Incident Policy

Alcohol related incidents:

- Referred for screening at Clinical ASAP
- Considered for disciplinary action under UCMJ
- An administrative separation action will be processed for Soldiers involved in two serious incidents of alcohol related misconduct in a year
- Alcohol Related Incidents (Misconduct) include but are not limited too:
  - Impaired on duty
  - DWI/DUIs
  - Underage drinking
  - Providing alcohol to someone under 21
  - Negative incident involving alcohol – fighting, child or spouse abuse etc.

Screening By Clinical ASAP

- **Possible outcomes:**
  - **No ASAP services required at this time: The Soldier does not have an alcohol or drug problem and does not require further education.**
  - **Refer to Alcohol Drug Abuse Prevention Training (ADAPT) – 12 Hours of education intervention**
  - **Referral to another agency – Chaplain, marriage counselor, etc.**
  - **Enrollment in to ASAP Rehabilitation – The counselor will contact the commander to discuss treatment options.**

Questions?

ASAP Telephone Number:
706 – 545- 1138/7027

ASAP Address:
BUILDING 241 BALTZELL AVE.

Responsible Drinking

Objectives

- Define responsible drinking
- List consequences of irresponsible drinking
- Discuss facts about underage drinking
- Discuss drinking responsibly tips

Media Messages

- Messages:
  - Binge drinking is out of control on college campuses
  - Having a drink once a day promotes good health
  - Don’t Drink and Drive
  - Drink in moderation
  - Drink responsibly
  - If you want to have fun, date, or watch sports then you have to drink

Definitions

- One drink: defined as 5 oz of wine (12 percent alcohol), 1.5 oz of 80-proof distilled spirits, or 12 oz of regular beer

- 5 oz of 12% wine = 5 X .12 = 0.6 oz of pure alcohol
- 1.5 oz of 80 Proof = 1.5 X .40 = 0.6 oz of pure alcohol

  Note: 80 proof = 40% alcohol
- 12 oz X 5% beer = 12 x .05 = 0.6 oz of pure alcohol

Definitions

- Binge (Episodic) Drinking: having five or more drinks on a single occasion at least once in the past 30 days
- Moderate Drinking: (multiple definitions)
  - One drink per typical drinking occasion at least once a week, *or* 2-4 drinks per typical drinking occasion 2-3 times per month, *or* 5 or more drinks per typical drinking occasion once a month or less
  - The consumption of up to 1 drink per day for women and up to 2 drinks per day for men
- Responsible Drinking: Not drinking irresponsibly?

Irresponsible Drinking

Results of Irresponsible Drinking

- DUI
- Vomiting
- Hangover
- Unexpected guest for breakfast
- Unprotected sex
- Unwanted sex
- Possible STD
- Fighting
- Loss of control – doing stupid things
- Reduced work quality and performance
- Financial problems
- Injury
- Problems with friends and family
- Health related problems
- Spouse/child abuse
- Passing out
- Black outs
- Death

National Statistics, Center for Substance

Responsible Drinking

- Responsible drinking habits vary from person to person; biology, sociology, and genealogy all play a role in what is considered responsible drinking.
- Due to medical conditions or dependence issues some individuals must abstain from alcohol to be considered a responsible drinker.
- Responsible Drinking: Drinking in a way that it does not adversely affect an individual's ability to fulfill their legal, moral, or social obligations nor does it negatively impact their health, job performance, or quality of life.

Drinking Tips

- Eat before and during drinking.
- Before you Celebrate… Designate. Identify a responsible driver or use public transportation.
- Don’t chug your drinks; drink slowly and make your drinks last.
- Alternate between alcoholic and nonalcoholic drinks.
- Remember the word HALT, don’t drink if you’re Hungry, Angry, Lonely, or Tired.

Drinking Tips

- Do not lose control of yourself.
- Remember, it’s ALWAYS ok NOT to drink.
- Avoid binge or other high risk drinking behaviors.
- Take a buddy and watch each others back
- Don’t leave your buddy behind
- Don’t drink when taking medication

Underage Drinking

Underage Drinking - The Controversy

- Beliefs (by many):
  - If a Soldier is old enough to vote, enlist in the Army, and die for their country; then he/she should be old enough to drink alcohol.
  - If an 18 year old person can vote, get married, enter into legal contracts, and smoke; then they should also be able to drink alcohol if they choose.
  - Alcohol is a legal drug for someone 21 or over; young adults want the right to make the decision whether to drink or not.

Underage Drinking - The Controversy

- Facts:
  - The drinking age in the Army depends on where you are stationed:
    - CONUS installation – 21 years old
    - Europe – 17 years old
    - Korea – 20 Years old
    - Puerto Rico – 18 Years old
  - Most Soldiers that deploy to fight in a war or conflict cannot drink alcohol in the area of operation regardless of their age.

Underage Drinking - The Controversy

- **Facts (Continued)**
  - **Soldiers who are deployed and get afforded R&R in country or a nearby country may be able to consume alcohol regardless of age.**
  - **USAR and NGB Soldiers under 21 cannot consume alcohol on or off activated status while in the US.**
  - **Under 21 firefighters cannot consume alcohol and they put their lives on the line nearly everyday.**

Underage Drinking

- The real deal
  - The law is the law. It doesn't matter whether or not you agree with it; you must still abide by it.
    - You may believe that male Soldiers should be allowed to use an umbrella when wearing class As or that female Soldiers should be able to wear ear rings in BDUs; but both violate AR 670-1.
    - Soldiers follow the uniform regulation and Soldiers should follow the under age drinking laws.

Summary

- Party Responsibly. Have a good time and blow off steam, but don't make drinking your priority. You should be there to have a good time not there just to get drunk.
- Plan Ahead. Make sure you've arranged for a sober ride home BEFORE going out.
- Pace Yourself. Limit yourself to one drink per hour or alternate between alcoholic and non-alcoholic drinks.
- Don't drink if you are underage. UCMJ
- Don't support underage drinking. UCMJ
- Warrior 0-0-1: zero underage drinking, zero DUIs, and no more than 1 drink an hour

Remember your …

FORT BENNING ARMY SUBSTANCE ABUSE PROGRAM
POWER OF CHOICE

WARRIOR

Personal Coürage

Respect

Integrity

Düty

Excellence

THC
(Marijuana)

Learning Objectives

- Identify from a list the different forms THC comes in.
- Describe how THC affects the human body.
- Identify from a list the different ways THC can be consumed.

What is THC?

- **Delta 9 – Tetrahydrocannabinol (THC) is the active ingredient in marijuana that causes users to feel *high*.**
- **Marijuana is a psychoactive or mind-altering drug.**
- **Psychoactive drugs produce a mind state similar to that of psychosis.**

What is THC?

- **Marijuana and THC are psychologically addictive.**
- **Marijuana and alcohol have come to be known as *gateway drugs*.**
- **Classified by the DEA as a Schedule I Controlled Substance.**

Types of THC

1. **Marijuana**
2. **Hash/Hashish**
3. **Hash Oil**

How is THC Consumed?

- **Smoking – Marijuana is absorbed through the capillaries in the lungs.**
- **Eaten / Drank – The chemicals in marijuana are absorbed into the small intestines.**
- **Mixed w/ Other Drugs – Marijuana is sometimes smoked with cocaine, crack, methamphetamine, PCP and other drugs sprinkled on.**

Effects of THC

- Euphoria
- Short Term Memory Loss
- Increased Appetite
- Bloodshot Eyes
- Dry Mouth / Throat
- Increased Heart Rate
- Respiratory

- Lowered Blood Pressure
- Loss of Coordination
- Paranoia
- Vivid Hallucinations
- Panic / Anxiety Attacks
- Psychosis
- Dependence

Effects of THC - Smoking

- Marijuana smoke contains more tar and cancer causing substances than tobacco smoke.
- Smoking marijuana can cause:
  - Bronchitis
  - Lung Cancer
  - Brain Damage
- Smoking marijuana causes some neurotransmitters to become inactive.

Effects of THC

Male Specific:

- Reduces the male hormone testosterone
- Can cause sex organs to not function properly.
- Greatly reduces sperm count

Female Specific:

- Testosterone levels increase
- Decreased sexual pleasure
- Disrupts menstrual cycles and ovulation

Effects of Withdrawal

While the effects of withdrawal have been described as mild and non life-threatening, they do include:

- **Severe anxiety**
- **Lack of pleasure**
- **Severe headaches**
- **Nausea**
- **Inability to sleep**

Testing for THC in the Army

- THC can be detected in urine for up to 30 days.
- The Army tests every specimen for THC
- The illegal use of THC or any drug goes against Soldiers Values and Warrior Pride.

Additional Information

Additional information on THC can be found by contacting the Army Substance Abuse Program or by visiting www.acsap.army.mil.

Cocaine

What is Cocaine?

- Cocaine is a bitter, white, odorless, crystalline drug.
- Cocaine has been classified as a Schedule II drug by the United States.
- Cocaine is extracted and refined from the Coca plant.
- A highly addictive stimulant that produces profound feelings of pleasure.

Learning Objectives

- Identify the ways cocaine can be consumed.
- Identify the effects cocaine has on the body.

History of Cocaine

1662 – Abraham Cowley writes *A Legend of Coca*, a poem about coca.

1708 – Coca is first mentioned in a materia medica, Institutiones Medicae.

1850s – Coca is used for the first time in throat surgery.

1855 – Cocaine is extracted from Coca leaves for the first time.

1862 – Merck produces ¼ pound

History of Cocaine

1883 – Merck produces ¾ pound of cocaine.

1884 – Cocaine is regularly used as an anesthetic in eye surgery.

1884 – Sigmund Freud publishes an article in which he recommends the use of cocaine to treat morphine addiction.

1884 – Merck produces 3,179 pounds of cocaine.

1886 – Merck produces 158,352

History of Cocaine

1886 – Coca Cola is first produced containing syrup and caffeine laced with cocaine.

1880s – Parke, Davis manufacture refined cocaine.

1905 – The snorting of cocaine begins to gain in popularity

1910 – First cases of nasal damage due to cocaine use are seen in hospitals around the United States.

1912 – Over 5,000 cocaine related deaths are reported in the

History of Cocaine

1914 – Cocaine is banned in the United States.

1976 – Freebase cocaine is first developed.

1980s – Crack is popularized by dealers and glamorized by the Hollywood media.

Mid 1980s – Crack cocaine becomes popular throughout the United States.

Crack
image from the Publisher Group

How is Cocaine Used?

Cocaine can be snorted, injected, smoked or eaten. The level and length of the effects depend on how the drug was induced.

	Onset	Duration
Snorted	1 minute	20-40 minutes
Injected	1-5 seconds	15-20 minutes
Smoked	Immediate	5-15 minutes

Cocaine's Physical Effect

While even the purest cocaine is dangerous, the cocaine that is purchased on the streets is even more so as it is often cut with powders of similar color, making it extremely impure. Physical side effects that have been known to be caused by cocaine use are:

- Decreased Appetite
- Increased Body Temperature
- Increased Heart Rate
- Dilated Pupils
- Severe Nose Damage (when snorted)
- Violent Behavior
- Kidney Failure
- Seizure and/or Stroke

Cocaine's Physiological Effects

- Increased Alertness
- Decreased Fatigue
- Increased Concentration
- Insomnia
- Increased Irritability
- Increased Psychosis
- Confused Behavior
- Increased Fear
- Extreme Paranoia
- Severe Anxiety Attacks
- Hallucinations (in extreme cases)
- Aggressive Behavior

Addiction and Withdrawal

Cocaine is one of the most addictive drugs known to man. Those who use cocaine heavily or regularly find it extremely difficult to stop and often suffer through serious withdrawal symptoms such as:

- **Severe Irritability**
- **Chronic Depression**
- **Paranoia**
- **Loss of Sex Drive**
- **Insomnia**
- **Excessive Sleep**
- **Eating Disorders**
- **Nausea / Vomiting**
- **Diarrhea**
- **Heart Attack**

Cocaine Testing in the Arm

- Cocaine can be detected in urine for 2-3 days after ingestion.
- The Army tests every specimen for:
  - Cocaine
  - THC
  - Amphetamines
- The illegal use of cocaine or any drug goes against Soldiers Values and Warrior Pride.

Additional Information

Additional information on cocaine can be found by contacting the Army Substance Abuse Program or by visiting www.acsap.army.mil.

Amphetamines

What are Amphetamines?

- Amphetamines are drugs that are classified as Central Nervous System (CNS) Stimulants.
- Amphetamines are also drugs that induce false feelings strength and enhanced motivation.
- Amphetamines can be divided into three basic groups:
  - Amphetamine (Benzedrine)
  - Dexamphetamine (Dexedrine)

Learning Objective

- State the definition of CNS Stimulant
- Identify the effects of amphetamines

History of Amphetamines

1887 – The first amphetamine was synthesized by a German chemist.

1919 – Methamphetamine is discovered.

1932 – Amphetamines sold for the first time as an over-the-counter cough suppressant.

1940s – Dextroamphetamine becomes commonly available throughout the US.

1950s – Amphetamines widely

History of Amphetamines

1960s – Methamphetamine use begins to appear around the United States.

1970s – Amphetamines are designated as an illegal substance by the *United States Drug Abuse Regulation and Control Act of 1970*.

Present – Amphetamines are classified by the DEA as a Schedule II Controlled Substance and smoking of

Why are Amphetamines Used?

- Amphetamines can be used for medicinal purposes.
- The most common legal uses today are to treat:
  - Narcolepsy
  - Hyperactivity (in children)
- They are also used for illicit purposes, the most common of which is to stay awake for long periods of time.
- Used by drug users to treat the unpleasant effects of other drugs.

How are Amphetamines Consumed?

- Orally – In pill, tablet or liquid form
- Snorted – This can cause severe damage to the interior and exterior of the nose.
- Injection –
  - Into the blood stream
  - Into muscle tissue
- Smoked

Effects of Amphetamine

Short Term

- Dilated Pupils
- Increased Blood Pressure
- Increased Heart Rate
- Decreased Appetite
- Dry Mouth
- Tremors
- Dizziness / Nausea
- Irregular Heartbeat
- Loss of Coordination
- Sudden Collapse
- Loss of Consciousness

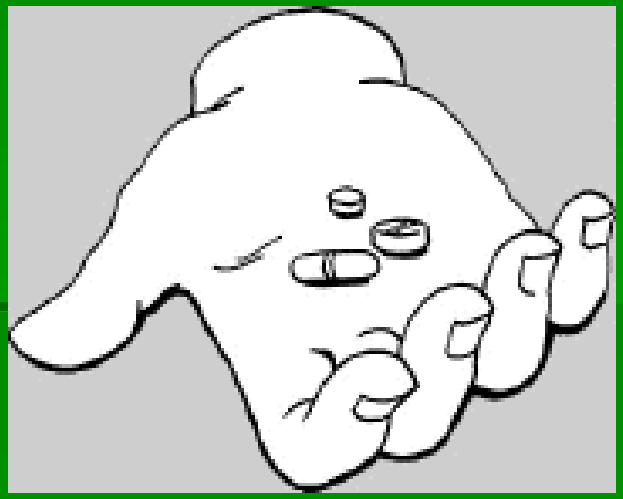
Effects of Amphetamine

Long Term

In addition to those listed below amphetamine use can cause the users to have long term problems with high blood pressure, irregular heartbeats, and severe sleeping disorders.

Malnutrition – Because Amphetamines reduce the users appetite, they are less likely to eat properly and because of this are

Chronic Psychosis – Symptoms include paranoia, delusions, and bizarre behavior. This can be seen as early as 1 week after the user has stopped using.



Chronic Anxiety/Tension - To combat this users often turn to alcohol and barbiturates for help. Chronic Anxiety may also lead to violent behavior.

Brain Damage – Long term use of Amphetamines can cause damage to the brain, specifically areas that deal with memory and everyday thinking.

Amphetamine Testing in the Army

- Amphetamines can be detected in urine for 2-3 days after ingestion.
- The Army tests every specimen for amphetamines.
- The illegal use of amphetamines or any drug goes against Soldiers Values and Warrior Pride.

Additional Information

Additional information on amphetamines can be found by contacting the Army Substance Abuse Program or by visiting www.acsap.army.mil.

Methamphetamine

Learning Objectives

- Identify the side effects of the drug methamphetamine.
- Identify the withdrawal symptoms associated with methamphetamine addiction.

What is Methamphetamine?

- Methamphetamine is a powerful, synthetic central nervous system stimulant.
- The majority of methamphetamine being consumed illegally is manufactured in clandestine laboratories around the United States.
- Classified by the DEA as a Schedule II Controlled Substance.
- Can be legally prescribed for attention deficit disorder

History of Methamphetamine

1919 – Methamphetamine first synthesized

1940s – Japan uses methamphetamine to increase work output by factor workers.

WWII – Used by Allies and the Axis to help stay awake during battles and bombing runs.

1959 – FDA bans the use of most amphetamines from use in inhalers due to their side effects.

1960s – Methamphetamine use

History of Methamphetamine

1970 – Use of methamphetamine rises at an alarming rate in California.

1970 – Amphetamines become a controlled substance due to the "U.S. Drug Abuse Regulation and Control Act of 1970".

1996 – The "Comprehensive Methamphetamine Control Act" establishes new reporting requirements for companies that sell methamphetamine supplies via mail.

Present – Associated with *raves* and belongs to *club drug* family.

How is Methamphetamine Used?

Methamphetamine is generally a white or off-white powder that can be ingested in several ways:

- **Orally**
- **Snorted**
- **Injected**
- **Smoked**

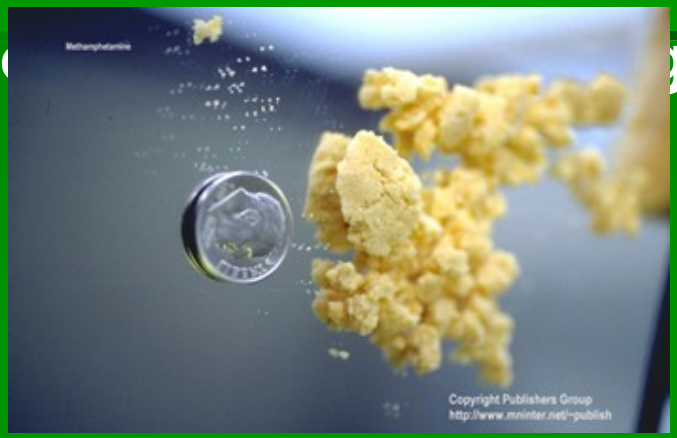
Short Term Side Effects

- Excessive Talking
- Increased Activity
- Nervousness
- Decreased Fatigue
- Anxiety / Panic Attacks
- Hallucinations
- Nervousness
- Excessive Sweating
- Skin Welts
- Violent / Suicidal Behavior

Long Term Side Effects

Methamphetamine use can cause serious long term side effects that can affect the user for the rest of their life:

- **Immune System Damage**
- **Psychological Problems**
- **S… …ge**

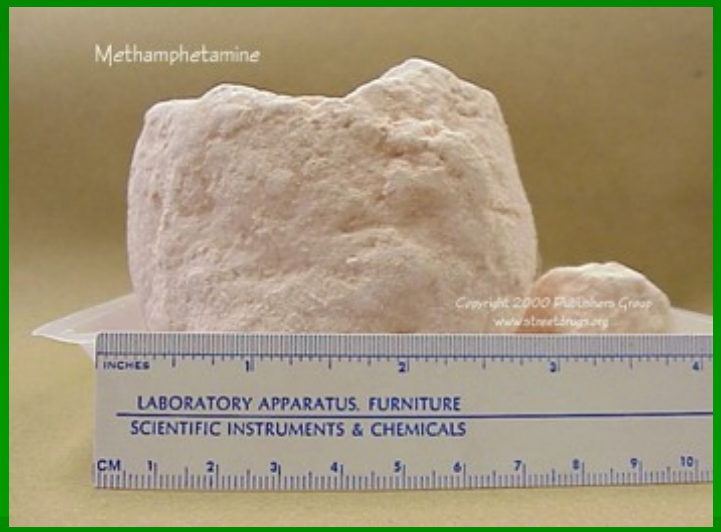


- **Fatal Kidney Disorders**
- **Fatal Lung Disorders**
- **Birth Defects**
- **Stroke**
- **Death**

Addiction

Physical Dependence – When the user's body cannot function properly without ingestion of the drug.

Psychological Dependence – When the consumption of the drug takes priority over other activities within the user's daily life.



Withdrawal

Symptoms of methamphetamine withdrawal can include:

- Hunger
- Extreme Fatigue
- Anxiety / Irritability
- Chronic Depression
- Restless Sleep
- Severe Nightmares
- Severe Distress
- Panic Attacks

Methamphetamine Testing in the Army

- Methamphetamine can be detected in urine for 2-3 days after ingestion.
- The Army tests every specimen for methamphetamines.
- The illegal use of methamphetamine or any drug goes against Soldiers Values and Warrior Pride.

Additional Information

Additional information on amphetamines can be found by contacting the Army Substance Abuse Program or by visiting www.acsap.army.mil.

Oxycontin

Learning Objective

- Identify the dangers of Oxycontin misuse and abuse.

What is Oxycontin

- Oxycontin is an opium derivative that is available by prescription.
- Oxycontin is an extremely potent and addictive pain killer that comes in time release tablets.
- Prescribed to cancer patients and chronic pain sufferers to help manage their pain.

Oxycontin

- Pills can be prescribed in 10, 20 and 40 milligram doses.
- Oxycontin is also known as OCs, Oxycoffins, Oxycotton and Killers
- Was approved by the FDA in 1995 as a time released form of Oxycodone.
- Because of its time release mechanism, oxycontin should only be consumed in its pill form.
- Oxycontin has been linked to

Minor Side Effects

- Constipation
- Dizziness
- Confusion
- Drowsiness
- Nausea / Vomiting
- Heartburn
- Pinpoint Pupils
- Dry Mouth

Oxycontin in 10, 20, 40, and 80 milligrams

Serious Side Effects

- Chest Pains
- Muscle Weakness
- Skin Rashes
- Breathing Difficulties
- Seizures
- Unconsciousness / Coma
- Death

Oxycontin Testing in the Army

- The Army tests for Oxycontin on a rotational schedule.
- The illegal use of Oxycontin or any drug goes against Army Values and Warrior Pride.

Additional Information

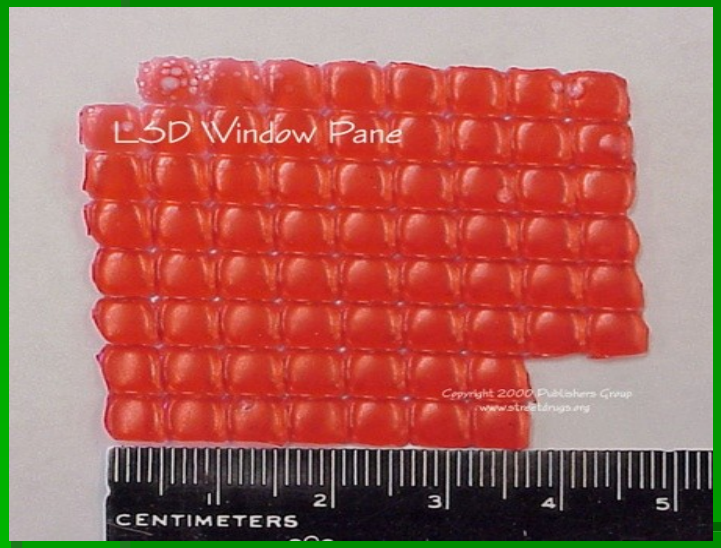
Additional information on Oxycontin can be found by contacting the Army Substance Abuse Program or by visiting www.acsap.army.mil.

Hallucinogens

Learning Objectives

- Identify the different types of hallucinogens.
- Identify how hallucinogens effect the human body.

What are Hallucinogens?

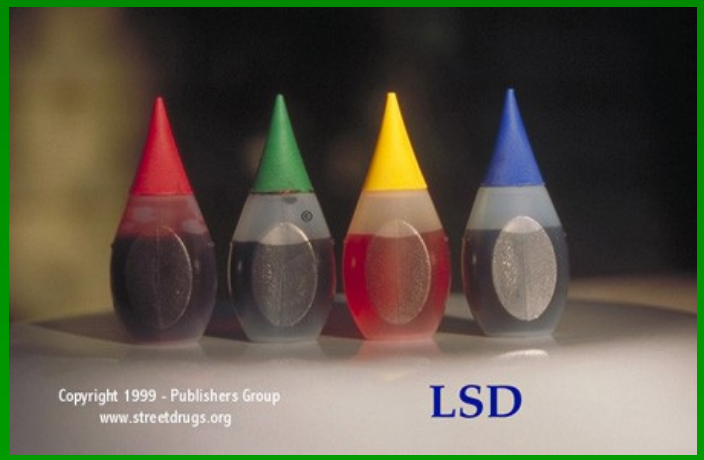


- A class of drugs that cause the user to experience hallucinations and alter reality.
- Hallucinogens are also known as *psychedelic* drugs.
- Hallucinogens can be both natural or synthetic drugs.
- Hallucinogens include LSD, Mescaline and Psilocybin and are sometimes associated with *club drugs* and *raves*.

LSD

What is LSD?

- **LSD, or d-lysergic acid diethylamide, is a hallucinogenic derived from a parasitic fungus that grows on rye.**
- **LSD is produced as a crystal, then dissolved in alcohol prior to sale and consumption.**
- **LSD users describe their experience on the drug as a *trip*.**



History of LSD

1938 – While researching blood stimulants, Albert Hoffman synthesizes LSD for the first time.

1943 – Albert Hoffman accidentally consumes LSD becoming the first person to consume LSD.

1949 – LSD, and its effects, are studied in Boston and Los Angeles.

1951 – The CIA becomes aware of LSD and begins to

History of LSD

1952 – The first study is published about treating depression with LSD

1962 – The FDA restricts LSD research & the first LSD related arrests are made.

1963 – LSD is found on the streets for the first time in the form of liquid on sugar cubes.

1967 – Federal government bans LSD in the United States

1970 – LSD is placed in Schedule 1 of the Controlled Substances

How is LSD Consumed?

LSD is generally taken orally in one of three ways:

- **Pill form**
- **On a piece of blotter paper**
- **Via liquid dripped onto a sugar cube or directly on the users tongue.**
- **Following ingestion, the drug's effects can be felt for 4-8 hours.**

LSD Testing in the Army

- LSD is difficult to test for in urine, even if testing occurs the day after ingestion.
- The Army tests for LSD on a rotational schedule.

Psilocybin

What is Psilocybin?

- **Psilocybin is a form of mushrooms that contain hallucinogenic properties.**
- **Also known as *magic mushrooms*, psilocybin is classified by the DEA as a Schedule 1 Controlled Substance.**
- **Hallucinogenic mushrooms have, historically, been used by several cultures during their religious rituals.**

How is Psilocybin Consumed?

- **Eaten – While the mushrooms are usually dried prior to sale and/or consumption, they can be eaten raw or cooked like regular mushrooms.**
- **Drank – Heated with water to make a tea or a soup.**
- **Smoked – The mushroom is ground into a fine powder and often smoked on top of marijuana**

Psilocybin Testing in the Army

- Psilocybin is detectable for 1-2 days following ingestion.
- The Army does not test for psilocybin on a regular basis.
- Special procedures MUST be followed during a test for psilocybin.
- Contact your local ASAP for assistance and guidance for psilocybin testing.

Mescaline

What is Mescaline?

- Mescaline is a psychedelic found in several species of cactus.
- Historically, the drug is dried and eaten in a ritual setting because of its hallucinogenic properties.
- Mescaline use was first witnessed in the 1800s where Native American tribes used mescaline during sacred ceremonies.
- In 1919 mescaline also

What is Mescaline?

- Generally, mescaline is a small button shaped cactus 2”-5” in diameter.
- Mescaline is not readily available for recreational use because it takes up to fifteen years for a single dose to mature.
- Mescaline is a Schedule 1 substance in the United States.

Mescaline Testing in the Army

- Mescaline is detectable for 1-2 days following ingestion.
- The Army does not test for mescaline on a regular basis.
- Contact your local ASAP for assistance and guidance for mescaline testing.

Effects of Hallucinogens

Physical Effects of Hallucinogens

- Dilated Pupils
- Increase Body Temperature
- Increased Heart Rate
- Increased Blood Pressure
- Extreme Sweating
- Loss of Appetite
- Sleeplessness
- Dry Mouth
- Body Tremors
- Nausea
- Loss of Motor Skills
- Loss of Coordination
- Seizures

Psychological Effects

- **Vivid hallucinations**
- **Loss of depth perception**
- **Sensation of floating**
- **Loss of thought process control**
- **Fusion of the senses**
- ***Bad Trips***
- **Distorted Perception of Time.**

Hallucinogens and Flashbacks

- Flashbacks are a long term side effect of hallucinogens.
- Flashbacks are spontaneous, unpredictable recurrences of the effects of hallucinogens without ingestion of the drug.
- There are three types of flashbacks:
  - Emotional
  - Somatic
  - Perceptual

Additional Information

Additional information on PCP can be found by contacting the Army Substance Abuse Program or by visiting www.acsap.army.mil.

Barbiturates

Learning Objectives

- Identify the medical conditions barbiturates are prescribed for.
- Identify the effects that barbiturates have on the human body.

What are Barbiturates?

- Barbiturates are multi-colored pills and tablets that are classified as CNS Depressants.
- Barbiturates are often identified on the street by the color of the pill/tablet but are most often known as “Downers”.
- The most common type of synthetic sedatives.

History of Barbiturates

1862 - Barbiturates were developed by Adolph von Bayer in 1862.

1903 – Put to use for the first time in medical practices.

Since 1903 – Over 2,000 types of barbiturates have been manufactured using Bayer's original formula.

Why are Barbiturates Used?

- Barbiturates are prescribed to treat several medical conditions.
  - Anxiety
  - Depression
  - Insomnia
  - AOD Withdrawal
- Barbiturates are also consumed to get “high”.
- Used by drug users to treat the unpleasant effects of other drugs.

How are Barbiturates Consumed?

- Orally – In pill, tablet or liquid form
- Injection –
  - Into the blood stream
  - Into muscle tissue
  - Directly under the skin
- Inserted into the body via suppository.

Effects of Barbiturates

Physical Effects

- Sleepiness
- Nausea
- Slurred Speech
- Breathing Disorders
- Reduced Sex Drive
- Coma

Psychological Effects

- Mild Euphoria
- Disinhibition
- Memory Impairment
- Increased Irritability
- Severe Paranoia
- Suicidal Thoughts

Additional Information

Additional information on barbiturates can be found by contacting the Army Substance Abuse Program or by visiting www.acsap.army.mil.

Rohypnol

Learning Objectives

- Identify from a list the chemical name for Rohypnol and the family of drugs it belongs to.
- Recognize the ways that Rohypnol can effect the human body.

What is Rohypnol?

- Rohypnol (chemical name – fluritzrazepam) is a sedative that is more than ten times as strong as Valium.
- Rohypnol belongs to the benzodiazepines family
- Rohypnol is known as a "Date Rape Drug" due to its association with sexual assaults.

What is Rohypnol?

- **Rohypnol is produced and marketed by Roche Pharmaceuticals Inc., a Swiss based Health Care Company.**

- **Rohypnol is available as a small, white tablet in 1 mg, or 2 mg doses with Roche inscribed into the pill.**

- **The consumption, possession and/or distribution of Rohypnol in the United States is illegal**

Rohypnol tablets are white and are single- or cross-scored on one side with "ROCHE" and "1" or "2" encircled on the other.

What is Rohypnol?

Because Rohypnol is odorless, colorless, and tasteless when dissolved in alcoholic/non-alcoholic beverages, LaRoche has begun to add additional properties to the pill. These properties within the pill:

- **Cause light colored drinks to turn blue.**
- **Dissolve slowly and form small chunks in dark colored beverages**

How is Rohypnol Consumed?

- Rohypnol is almost always ingested orally in either the pill form or dissolved in a beverage.
- Rohypnol, in its powder form, can also be snorted.
- The effects of Rohypnol can be felt 15-30 minutes after ingestion.
- The effects of the drug can be felt for up to 35 hours after ingestion.

Rohypnol – General Information

- Rohypnol is sometimes used as an “alcohol extender” in combination with beer and other alcoholic beverages.

- Poly-drug users sometimes ingest Rohypnol to enhance low-quality heroin or to counteract the effects of a cocaine binge.

- Long time Rohypnol users may develop a tolerance for the drug, which could lead to physical dependence and severe withdrawal symptoms.

Effects of Rohypnol

- Disinhibition
- Slurred Speech
- Muscle Relaxation
- Aggressive Behavior
- Fearlessness
- Disorientation
- Amnesia

Though typically white in color, flunitrazepam pills recently seized in Egypt were of a brownish-pink tint, indicating a counterfeit product.

- Impaired Judgment
- Respiratory Distress
- Loss of Motor Skills
- Blackouts (can last 8-24 hours)
- Dizziness/Nausea
- Overdose
- Death

Rohypnol Testing in the Army

- Rohypnol is extremely difficult to detect more than 4 hours after ingestion.
- A division of Hoffman-LaRoche has developed a special program to assist medical and law enforcement personnel to test for the presence of Rohypnol in the blood and urine specimen from rape victims.
- The Army does not test for Rohypnol on a regular basis.

Additional Information

Additional information on cocaine can be found by contacting the Army Substance Abuse Program or by visiting www.acsap.army.mil.

PCP

Learning Objectives

- Select from a list the scientific name for PCP.
- Identify the side effects of PCP.

What is PCP?

- PCP, or Phencyclidine, is a dissociative anesthetic, or drug that separates perception from sensation.
- PCP can be found in several different forms:
  - Crystalline Powder
  - Colored Powder
  - Pills
  - Capsules
  - Liquid

History of PCP

1956 – PCP is synthesized for the first time.

1957 – PCP is used on humans for the first time.

1963 – PCP is patented as an anesthetic named Sernyl.

1965 – PCP is banned for human use due to its side effects.

1967 – PCP is marketed as an animal anesthetic called Sernylan.

History of PCP

1967 – PCP begins showing up on the streets as a recreational drug.

1978 – PCP is classified a Schedule II in accordance with the Controlled Substance Act.

1979 – Use of PCP rises around the country. 7% of high school seniors reported PCP use in the last 12 months.

1980 to present – PCP use continues to be problem but recent numbers have

How is PCP Taken?

PCP can be consumed in several ways:

- **Orally – In a pill or liquid form.**
- **Smoked**
- **Snorted**
- **Injected**

How is PCP Taken?

PCP has been known to be used in combination with other drugs and substances:

1. **LSD – *Super Tripping***
2. **Marijuana – *Killer Weed* or *Boat***
3. **Tobacco – *Sherms***
4. **Mint/Parsley**

PCP's Physical Effects

- Sleepiness
- Dizziness
- Irregular Heart Rate
- Loss of Bladder Control
- Jerky Eye Movement
- Heavy Sweating
- Vomiting
- Speech Impediments
- Loss of Reflexes
- Kidney Failure
- Brain Hemorrhaging
- Coma
- Death

PCP's Psychological Effects

- Depression of the Central Nervous System (CNS)
- Stimulation of the CNS
- Unpredictable Aggressive Behavior
- Schizophrenia
- Delirium
- Suicidal Tendencies
- Toxic Psychosis

PCP Testing in the Army

- The Army tests for PCP on a rotational schedule.
- PCP can be detected in urine for 2-3 days after ingestion.
- The illegal use of PCP or any drug goes against Army Values and Warrior Pride.

Additional Information

Additional information on PCP can be found by contacting the Army Substance Abuse Program or by visiting www.acsap.army.mil.

Inhalants

Learning Objectives

- Identify the three classes of inhalants.
- Identify the types of inhalants that are abused.

What are Inhalants?

- **Breathable chemical vapors that produce mind altering effects.**
- **There are three types of inhalants**
  - **Solvents**
  - **Gases**
  - **Nitrites**
- **Street names include *poppers, snappers, ozone*.**

How are Inhalants Abused?

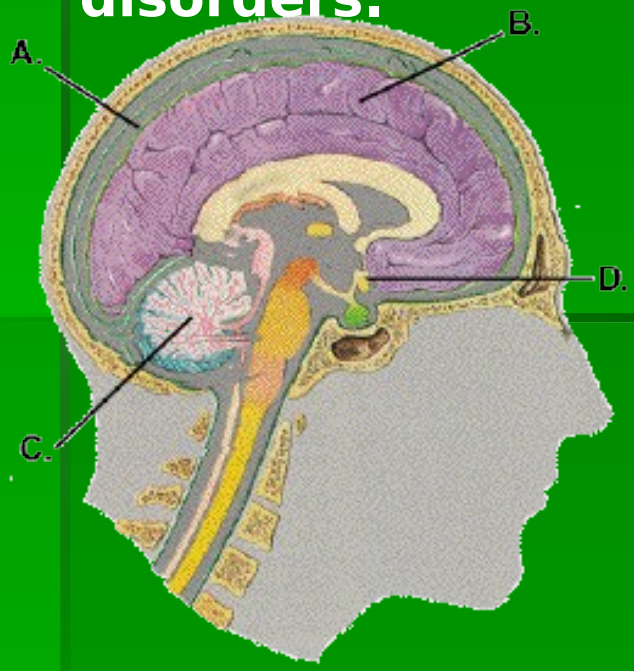
- Inhalants are ingested into the body by breathing in the vapors of the product. Several methods of inhalation can be used by abusers:
  - Using a bag
  - Using a rag
  - Using pressurized containers

Effects of Inhalants

- Chronic Memory Loss
- Emotional Instability
- Slurred Speech
- Body Tremors
- Sight Disorders
- Liver Damage
- Hearing Loss
- Kidney Damage
- Bone Marrow Damage
- Paralysis
- Brain Damage
- Sudden Sniffing Death

Inhalants & Brain Damage

A. **Brain – Inhalants abuse causes a variety of serious sensory and psychological disorders.**



B. **Cerebral Cortex – Inhalant abuse causes personality changes, memory loss, hallucinations, and learning disabilities.**

C. **Cerebellum – Inhalant abuse causes loss of coordination, slurred speech, chronic tremors, and uncontrollable shaking.**

D. **Ophthalmic Nerve – Inhalant abuse can cause serious sight disorders, including blindness.**

Products Abused

- Rubber Cement
- Hair Spray
- Fabric Protector
- Chloroform
- Paint Thinner
- White Out
- Whippets

- Toxic Markers
- Lighter Fluid
- Gasoline
- Octane Booster
- Nitrous Oxide
- Room Deodorizer
- Helium

Additional Information

Additional information on inhalants can be found by contacting the Army Substance Abuse Program or by visiting www.acsap.army.mil.

THE AUDIT

SELF TEST

Question #1

How often do you have a drink containing alcohol?

	SCORE
Never	0
Monthly or Less	1
2 to 4 times per month	2
2 to 3 times per week	3
4 or more times a week	4

Question #2

How many drinks containing alcohol do you have on a typical day when you are drinking?

	SCORE
1 or 2.....	0
3 or 4.....	1
5 or 6.....	2
7 to 9.....	3
10 or more.....	4

Question #3

How often do you have six or more drinks on one occasion?

SCORE

- Never..... 0
- Less than monthly..... 1
- Monthly..... 2
- 2 to 3 times per week..... 3
- 4 or more times a week..... 4

Question #4

How often during the last year have you found that you were not able to stop drinking once you had started?

	SCORE
Never.....	0
Less than monthly.....	1
Monthly.....	2
2 to 3 times per week.....	3
4 or more times a week.....	4

Question #5

How often during the last year have you failed to do what was normally expected from you because of drinking?

	SCORE
Never.....	0
Less than monthly.....	1
Monthly.....	2
2 to 3 times per week.....	3
4 or more times a week.....	4

Question #6

How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?

	SCORE
Never.....	0
Less than monthly.....	1
Monthly.....	2
2 to 3 times per week.....	3
4 or more times a week.....	4

Question #7

How often during the last year have you had a feeling of guilt or remorse after drinking?

	SCORE
Never.....	0
Less than monthly.....	1
Monthly.....	2
2 to 3 times per week.....	3
4 or more times a week.....	4

Question #8

How often during the last year have you been unable to remember what happened the night before because you had been drinking?

SCORE

- Never..... 0
- Less than monthly..... 1
- Monthly..... 2
- 2 to 3 times per week..... 3
- 4 or more times a week.....4

Question #9

Have you or someone else been injured as a result of your drinking?

SCORE

- No..... 0
- Yes, but not in the last year..... 2
- Yes, during the last year..... 4

Question #10

Has a relative, friend, doctor, or other health worker been concerned about your drinking or suggested you cut down?

SCORE

- No.....0
- Yes, but not in the last year..... 2
- Yes, during the last year..... 4

Overall Score

If you scored a “0” then you are a non-drinker and probably wondering why you had to sit in this cla

Overall Score

If you scored between “1” and “7” then you are probably just a social drinker who drinks occasionally and responsibly.

Overall Score

If you scored between “8” and “40”:

You are exhibiting some high risk drinking behaviors and may want to take a closer look at your drinking patterns and any effects your drinking is having on your:

- **Relationships**
- **Work**
- **Finances**
- **Legal**

Overall Score

If you scored greater than “40”, then you either need to take a math class or you are drunk right now!

The AUDIT

Designed by the World Health Organization

- Screening Tool
- Identify Hazardous or harmful drinking behaviors

Army Statistics

- Audit results indicate that 31% of all Soldiers surveyed exhibit high risk drinking behaviors.
- 72.5 % of all Soldiers screened and enrolled by the ASAP for a substance abuse problems are enrolled in treatment for Alcohol not drugs.
- The Army enrolls over 2,000 Soldiers in treatment for alcohol abuse after they receive a DWI/DUI each year.

Army Statistics

- **The last DoD Health Survey indicated:**
  - **Soldiers abuse alcohol more than Sailors or Airman.**
  - **10.3% of Soldiers experience serious consequences such as article 15s, DUIs, injuries, or divorce, etc due to their drinking.**
  - **16% of Soldiers experience productivity loss at work such as being late, accidents, illness, or performing below standards due to alcohol use.**

Summary

ASAP Telephone Number:
706 – 545- 1138/7027

ASAP Address:
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